

Appendix

Development of Performance Measures for the EMSC Program

Detail Sheet for Performance Measure #68

PERFORMANCE MEASURE #68	The degree to which the State/Territory has established permanence of EMSC in the State/Territory EMS system.
GOAL	<p>There is no requirement for the overarching Performance Measure #68, but there are targets for each of the four sub-measures:</p> <ol style="list-style-type: none"> By 2006, an EMSC Advisory Committee will have been established within the State/Territory. By 2007, pediatric representation will have been incorporated on the State/Territory EMS Board. By 2011, an in-State/Territory-funded full time equivalent (FTE) for an EMSC Coordinator that is dedicated solely to the EMSC Program will have been established. By 2011, all five EMSC priorities will have been integrated into existing EMS statutes/regulations.
MEASURE	The degree to which the State/Territory has established permanence of EMSC in the State/Territory EMS system.
DEFINITION	<p>Calculation: Calculation of this measure involves completing the attached Aggregated Data Collection Form, which includes a checklist of the four elements that indicate permanence of EMSC in the State/Territory EMS system.</p> <p>Definition of Terms:</p> <p><i>Permanence</i> “Permanence” of EMSC in the State/Territory EMS system is defined by the following four elements:</p> <ol style="list-style-type: none"> Establishment of an EMSC Advisory Committee within the State/Territory (<i>Performance Measure #68a</i>) Incorporation of pediatric representation on the State/Territory EMS board (<i>Performance Measure #68b</i>) Establishment of an in-State/Territory-funded full time equivalent (FTE) for an EMSC Coordinator that is dedicated solely to the EMSC Program (<i>Performance Measure #68c</i>) Integration of EMSC priorities into existing EMS statutes/regulations (<i>Performance Measure #68d</i>) <p><i>EMSC</i> The component of EMS that addresses pediatric and adolescent needs, and the Program that strives to ensure the establishment and permanence of that component.</p>

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EMSC STRATEGIC OBJECTIVE	<p><i>EMS system</i></p> <p>The continuum of patient care from prevention to rehabilitation, including pre-hospital, dispatch communications, out-of-hospital, hospital, primary care, emergency care, inpatient, and medical home. It encompasses every injury and illness.¹³</p> <p>Related to Strategic Objectives 6 and 7:</p> <ul style="list-style-type: none"> • Objective 6: Ensure that integration of health services meets children's needs. • Objective 7: Promote institutionalization of EMSC through legislation and regulation.
DATA SOURCE(S)	<p>Data Sources:</p> <ul style="list-style-type: none"> • Data Collections Forms for Performance Measures #68a, #68b, #68c, and #68d
IMPLEMENTATION PROCESS	<p>Process to Collect Data For This Measure:</p> <ul style="list-style-type: none"> • Collect information to complete the attached Aggregated Data Collection Form from the Data Collections Forms for Performance Measures #68a (page 65), #68b (page 69), #68c (page 72), and #68d (page 77). • Complete the attached Aggregated Data Collection Form. Submit supporting documentation with your EMSC continuing grant application.
IMPLEMENTATION CONSIDERATIONS	N/A
SIGNIFICANCE	<p>Establishing permanence of EMSC in the State/Territory EMS system is important for building the infrastructure of the EMSC Program and is fundamental to its success. For the EMSC Program to be sustained in the long-term and reach permanence, it is important to establish an EMSC Advisory Committee to ensure that the priorities of the EMSC Program are addressed. It is also important to reduce the Program's reliance on federal funds to support the EMSC Coordinator position. Moreover, by ensuring pediatric representation on the State/Territory EMS Board, pediatric issues will more likely be addressed. Lastly, the permanence of EMSC in the State/Territory EMS system is contingent upon the integration of EMSC priorities into existing EMS statutes/regulations to ensure that pediatric emergency issues and/or deficiencies are addressed state/territory-wide.</p>

¹³ To realize the EMS vision of community-based health management that is integrated with the overall health care system, the *EMS Agenda for the Future* proposes continued development of 14 EMS attributes. They are: Integration of Health Services, EMS Research, Legislation and Regulation, System Finance, Human Resources, Medical Direction, Education Systems, Public Education, Prevention, Public Access, Communication Systems, Clinical Care, Information Systems, and Evaluation.

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Aggregated Data Collection Form for Performance Measure #68

Please indicate the progress your State/Territory has made towards establishing the permanence of EMSC in the State/Territory EMS system (Performance Measures #68a, #68b, #68c, and #68d) and whether your State/Territory has met the target for each element of permanence.

Elements Indicating Permanence of EMSC in the State/Territory EMS System	Yes/No	Target	Target Met?	
			Yes ✓	No ✓
a. The establishment of an EMSC Advisory Committee within the State/Territory.		"Yes" by 2006		
b. The incorporation of pediatric representation on the State/Territory EMS Board.		"Yes" by 2007		
c. The establishment of an in-State/Territory-funded full time equivalent (FTE) for an EMSC Coordinator that is dedicated solely to the EMSC Program.		"Yes" by 2011		
d. The integration of EMSC priorities into existing EMS statutes/regulations.		"Yes" by 2011		

Targets for All Four Measures Met (Yes/No): _____